



# City of Santa Clara

The Center of What's Possible

## LOBBYIST REGISTRATION & REPORTING FORM

For Official Use Only

Page \_\_\_\_ of \_\_\_\_

Type of Report (check all that apply):

- Initial Registration       Amendment to \_\_\_\_\_ filed on: \_\_\_\_\_  
 Annual Renewal       Termination effective: \_\_\_\_\_  
(filed annually by Jan. 15th)      (see Section III)  
 Semi-Annual Period:  
 1st Semi-Annual Period (January 1st - June 30th, 20\_\_)  
 2nd Semi-Annual Period (July 1st - December 31st, 20\_\_)

SCMC § 2.155.030 and 2.155.040

SEE INSTRUCTIONS

See Fee Schedule at City Clerk Webpage

### SECTION I

#### LOBBYIST INFORMATION

Are you a:       Contract Lobbyist       Business or Organization Lobbyist       Expenditure Lobbyist

Name of Lobbyist: \_\_\_\_\_ Telephone Number: \_\_\_\_\_  
( )

Business Address: (Number and Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip Code) \_\_\_\_\_ Fax Number: \_\_\_\_\_  
( )

Mailing Address: (If different than above) \_\_\_\_\_ E-mail: \_\_\_\_\_

Santa Clara Business License Number: \_\_\_\_\_ DBA: \_\_\_\_\_

Federal Employer Identification Number (FEIN): \_\_\_\_\_

Specify how the Contract Lobbyist, Business or Operation Lobbyist, or the Expenditure Lobbyist is organized:

- Sole Proprietorship       Partnership       Non-Profit Corporation       For-Profit Corporation      Other: \_\_\_\_\_

If the Lobbyist is a sole proprietor or partnership of fewer than five (5) persons, state the name(s) of the sole proprietor or persons with an ownership interest in the business: \_\_\_\_\_

If the Lobbyist is a corporation (for-profit or non-profit), state the name(s) of Officers and Agent for Service of Process and their respective contact information (if different from above): \_\_\_\_\_

**SECTION II:**

**REPORT FOR EACH CATEGORY OF LOBBYIST**

**Contract Lobbyist**

Name of each person working for the Contract Lobbyist that is engaged in lobbying activity:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CLIENT INFORMATION**

Client Name, Address, and Telephone Number

Effective Date of Representation

Specify the nature and purpose of the Client's business.

\_\_\_\_\_  
\_\_\_\_\_

**CLIENT INFORMATION (CONTRACT LOBBYIST ONLY)**

Client Name, Address, and Telephone Number:

Effective Date:

Describe the legislative or administrative action(s) the Contract Lobbyist was retained to influence and the outcome sought.

Client Name, Address, and Telephone Number:

Effective Date:

Describe the legislative or administrative action(s) the Contract Lobbyist was retained to influence and the outcome sought.

Client Name, Address, and Telephone Number:

Effective Date:

Describe the legislative or administrative action(s) the Contract Lobbyist was retained to influence and the outcome sought.

Client Name, Address, and Telephone Number:

Effective Date:

Describe the legislative or administrative action(s) the Contract Lobbyist was retained to influence and the outcome sought.

Client Name, Address, and Telephone Number:

Effective Date:

Describe the legislative or administrative action(s) the Contract Lobbyist was retained to influence and the outcome sought.

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**SECTION II:**

Name of Business or Organization Lobbyist: \_\_\_\_\_

Name of each owner, compensated officer, or compensated employee engaged in lobbying activity on behalf of the Business or Organization Lobbyist:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**THE NATURE OF THE BUSINESS, ORGANIZATION OR ASSOCIATION.**

Describe the nature and purpose of the business, organization or association.

\_\_\_\_\_  
\_\_\_\_\_

**THE LEGISLATIVE OR ADMINISTRATIVE ACTION(S) THE BUSINESS OR ORGANIZATION LOBBYIST SEEKS TO INFLUENCE.**

Describe the legislative or administrative action(s) the Business or Organization Lobbyist was retained to influence and the outcome sought.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Expenditure Lobbyist**

Name of Expenditure Lobbyist: \_\_\_\_\_

Name of each person working for the Expenditure Lobbyist that is engaged in lobbying activity (if applicable):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**THE LEGISLATIVE OR ADMINISTRATIVE ACTION(S) THE EXPENDITURE LOBBYIST SEEKS TO INFLUENCE.**

Describe the legislative or administrative action(s) the Expenditure Lobbyist was retained to influence and the outcome sought.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Amount of Payment or Expenditure: \$ \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**SECTION III**

**TERMINATION**

I certify that I have been authorized by the Lobbyist identified above to make this verification. I have reviewed the requirements of the provisions of the Santa Clara Municipal Code (Chapter 2.155). I certify under penalty of perjury under the laws of the State of California that I have reviewed the Notice of Termination and to the best of my knowledge the information contained herein is true and complete.

Termination Effective: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Executed on: \_\_\_\_\_

(month, day, year)

**ATTACHMENTS**

I have reviewed the lobbyist guidelines and I have nothing to report.

Attached to this Report is/are the following forms (check all that apply):

Form B - Payment for Consultant and Other Services

Other: \_\_\_\_\_

**FEES DUE**

Lobbyist Registration Fee\* (January 1 - June 30)

\$

Prorated Registration Fee\*\* (July 1 - December 31)

\$

Amended Registration Fee

\$

Delinquent Fee

\$

Registration	Prorated Registration	Client Registration	Amendment	Delinquent
\$773.00	\$364.00	\$136.00 per client	\$182.00	\$25 per day with a max of \$500

**Please make checks payable to:**  
 City of Santa Clara  
**Forms and payment can be sent to:**  
 City of Santa Clara  
 City Clerk's Office  
 1500 Warburton Avenue  
 Santa Clara, CA 95050

\$

Total Payment Due with Report

**NOTE:** Late fees will apply to any lobbying activity not reported after the 15 days of qualifying as a lobbyist

\*Initial registration fee is due within 15 days after qualifying as a lobbyist

\*\*Prorated fee applies for persons registering for the first time after June 30 of a given year

**VERIFICATION**

I certify that I have been authorized by the Lobbyist identified above to make this verification. I have reviewed the requirements of the provisions of the Santa Clara Municipal Code (Chapter 2.155). I certify under penalty of perjury under the laws of the State of California that I have reviewed this Lobbyist Report and to the best of my knowledge the information contained herein is true and complete.

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Executed on: \_\_\_\_\_

(original signature)

(month, day, year)

